SFW

PTO/SB/17 (12-04) Approved for use through 07/31/2006. OMB 0651-0032

Date: November 22, 2006

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Pai Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818) **Application Number** 10/807,306 FEE TRANSMITTAL Filing Date March 24, 2004 For FY 2006 First Named Inventor Hiroshi TANAKA **Examiner Name** I. O. Akanbi Applicant claims small entity status. See 37 C.F.R. 1.27 2877 Art Unit TOTAL AMOUNT OF PAYMENT 00862.023511 (\$)0.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Х Deposit Account Deposit Account Number:__ 06-1205 Deposit Account Name: Fitzpatrick, Cella, Harper & Scinto For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of Х Credit any overpayments fee(s) under 37 C.F.R. 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES** Small Entity Small Entity **Small Entity Application Type** Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee(\$) Fee(\$) Fee(\$) Utility 300 150 500 250 200 100 0.00 Design 200 100 100 50 130 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 2. EXCESS CLAIM FEES Small Entity Fee Description Fee(\$) Fee(\$) Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 Multiple dependent claims 360 180 **Total Claims** Extra Claims Fee (\$) **Multiple Dependent Claims** - 20 or (HP) = 0 x 50.00 Fee(\$) Fee Paid (\$) HP= highest number of total claims paid for, if greater than 20 360.00 Indep. Claims Extra Claims Fee(\$) Fee Paid (\$) -3 or (HP) =0 200.00 х HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). **Total Sheets** Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) 0 (round up to a whole number) x - 100 = 250.00 0.00 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other: SUBMITTED BY Signature Registration No. 33,326 Telephone (Attorney/Agent) 202-530-1010

Name (Print/Type)

Steven E. Warner



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

)
: Examiner: I. O. Akanbi
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: Group Art Unit: 2877
)
: Confirmation No.: 3829
)
: November 22, 2006
)

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT AND LETTER SUBMITTING SUBSTITUTE SPECIFICATION

Sir:

In response to the Official Action dated August 24, 2006, please amend the aboveidentified application as follows: